

12-18-01

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I hereby certify that this correspondence (along with any paper referred to as being attached or enclosed) is being mailed via "Express Mail Post Office to Addressee" service of the United States Postal Services (Express Mail Label No. EK 848 915 910 US) on the date shown below in an envelope addressed to the Hon. Commissioner of Patents and Trademarks, Washington, DC 20231.

Dated: December 7, 2001 1041

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE REQUEST FOR FILING NATIONAL PATENT APPLICATION

<u>Under 35 USC 111(a) and Rule 53(b)</u>

Hon. Commissioner of Patents Washington, D.C. 20231

WITH SIGNED DECLARATION

NONPROVISIONAL NON REISSUE NON PCT NAT PHASE

Atty. Dkt.:

PW 068802

272092

Client Ref

Sir:

indications

Herewith is the PATENT APPLICATION of Inventor(s): Nicholas PALAHNUK and Simon HOLDEN

Title LIP ENHANCER

including.	uing. Date: December 7, 2001							
1. Specification:7 pages (only spec. and claims) 2. [Specification in non-English language								
3. Declaration	3. Declaration Original Facsimile/Copy Abstract 1 page(s); 15 numbered claims							
4. 🔀 Drawings:2	4. ☑ Drawings: 2 sheet(s) ☐ informal; ☑ formal of size: ☐ A4 ☑ 11"							
5. See top first page re prior Provisional, National or International application(s). ("X" box only if info is there and do not								
complete corresponding item 5 or 6). (Prior M# SN)								
6. AMEND the specification please by inserting before the first line: This is a Continuation-in-Part								
☐ Divisional ☐ Continuation ☐ Substitute Application (MPEP 201.09) of:								
6(a) National Appln. No. / filed (M#)								
6(b) International Appln. No filed								
which designated the U.S., and that International Application was published under PCT Article 21(2) in								
English								
7. AMEND the specification by inserting before the first line: This application claims the benefit of U.S.								
	n No. 60/ , file							
	nt and cover sheet. Please return	the recorded assignment to the u	ndersigned.					
9. Prior application is assign	ned to							
by Assignment recorded Reel Frame								
10. FOREIGN priority is claimed under 35 USC 119(a)-(d)/365(b) based on filing in								
11. <u> </u>	(country)							
			(country)					
Application No.	Filing Date	Application No.	Filing Date					
Application No. (1)	Filing Date	Application No.	` ''					
	Filing Date		· · · · · · · · · · · · · · · · · · ·					
(1)	Filing Date	(2)	· · · · · · · · · · · · · · · · · · ·					
(1)	Filing Date	(2) (4)	` ''					

٠	12. (No.) Certified c				usly filed (date)		
	in U.S. Application			filed on _			
7	13. Small entity status →			⊠ <u>is</u> claimed	(Pre-filing confirmation	tion required)	
	13(a).	(No.) Small I	Entity Statement(s) (since 9/8/00	o small entity statem	ent(s) <u>not essential</u>	to make claim
	13(b) See NONPUBLICAT	TION REQUEST	<u>r</u> under Rule 213(a) attached (P	AT-258)		
14. <u>DOMESTIC/INTERNATIONAL</u> priority is claimed under 35 USC 119(e)/120/365(c) based on the following provision nonprovisional and/or PCT international application(s):							ıal,
	Application No.	Filing Date		Application	No	Filing Data	
		Filling Date		Application	NO.	Filing Date	
	(1)			(4)			
	(2)			(5)			
	(3)			(6)			
	 15. This application is being named in the prior application. 16. Attached: 17. Preliminary Amendment: 	:					vas not
i ż	THE FOLLOWING	<u>G FILING FEE I</u>	S BASED ON CL	<u>AIMS AS FILI</u>	ED LESS ANY ABO	VE CANCELLED	
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뛕	20. Independent Claims 3		minus 3 =	*0	x \$84/\$42 =	+0	102/202
ŧ۵					If answer is zero or less, en		
1 <u>1</u>	21. If any proper multiple depend (Leave this line blank if this is a				+ \$280/\$140	+0	104/204
U	22. TOTAL FILING FEE ENCLO					D = \$370	
•	23. If "non-English" box 2 is X'd,				+ \$130	+0	139
1	24. If "assignment" box 8 is X'd,				+ \$40	+0	581
1 =	25. Attached is a Petition/Fe	e under Rule No	0.		+ \$130	+0	122
1	26.			TO	TAL FEE ENCLOSE	D = \$370	
	Our Deposit Account No. 03-3975 Our Order No. 068802 272092 C# M# CHARGE STATEMENT: The Commissioner is hereby authorized to charge any fee specifically authorized hereafter, or any missing or insufficient fee(s) filed, or asserted to be filed, or which should have been filed herewith or concerning any paper filed hereafter, and which may be required under Rules 16-18 (missing or insufficient fee only) now or hereafter relative to this application and the resulting Official document under Rule 20, or credit any overpayment, to our						
	Account/Order Nos. shown above for w	hich purpose a dupl	licate copy of this she	et is attached.	,		out .
	This CHARGE STATEMENT does not authorize charge of the issue fee until/unless an issue fee transmittal form is filed.						
	Pillsbury Winthrop LLP Intellectual Property Group Pillsbury Winthrop LLP						
	50 Fremont Street			/			
	P.O. Box 7880	By Atty:	Jonathan E. Jol	be, Jr.	Reg.	No. 28,429	
	San Francisco, CA 94105		10	, 1			
	Tel: (619) 234-5000	Sig:	M	(_ Λ		East (610) 1	26_100E
	JEJ/KAC	aig:		7		Fax: (619) 2 Tel: (619) 5	
	NOTE: File in duplicate with 2 po	ost card receipts	(PAT-103) & attac	chments		10 (017) 3	



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT APPLICATION of:

Nicholas PALAHNUK and

LIP ENHANCER

Inventor(s): Simon HOLDEN

Atty Dkt: 68802

272092

C#

M#

Filed: Herewith

Title:

NOTE: Request will **NOT** be honored by PTO

if filed later than the application.

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MUST be filed with the application initially.

NONPUBLICATION REQUEST UNDER RULE 213(a)

The attached new application is **NOT TO BE PUBLISHED** under 35 U.S.C. §122(b).

I hereby certify that the invention disclosed in the attached new application has not been and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing.

This request is signed in compliance with the provisions of Rule 33(b) by the signature(s) in one of the three columns below.

Respectfully Submitted,

Pillsbury Winthrop LLP

# # # #	Inventor(s)	Assignee(s) of Record Per Enclosed Assignment		
Sig:		Assignee:	By Atty.:	Jonathan E. Jobe, Jr.
Name:			Reg. No.:	28,429
Date:				0611
		Ву	Sig:	<u> </u>
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Name:		Title:	Tel.:	/ (619) 5 44 -3102
Date:		Date	Fax:	(619) 236-1995